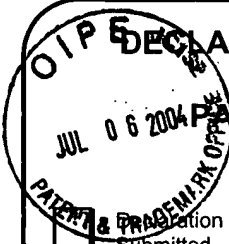


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 DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) <input type="checkbox"/> Declaration Submitted With Initial Filing OR <input checked="" type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	Attorney Docket Number	GUID-036
	First Named Inventor	Morejohn, Dwight P.
	COMPLETE IF KNOWN	
	Application Number	10/748,733
	Filing Date	December 30, 2003
	Art Unit	3764
Examiner Name	Unassigned	

I hereby declare that:

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

TRANSABDOMINAL SURGERY SYSTEM

(Title of the Invention)

the specification of which

☒ is attached hereto

OR

☒ was filed on (MM/DD/YYYY) 12/30/2003 as United States Application Number or PCT International

Application Number 10/748,733 and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

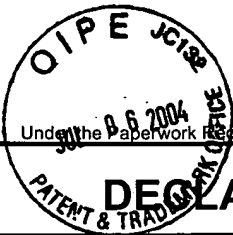
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				Yes	No
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

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If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

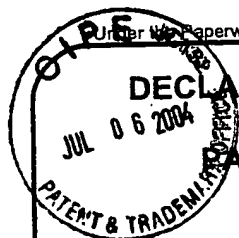


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PTO/SB/01 (06-03)
Approved for use through 07/31/2003. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

DECLARATION — Utility or Design Patent Application

Direct all correspondence to: <input checked="" type="checkbox"/> Customer Number: 36154				OR <input type="checkbox"/> Correspondence address below	
Name LAW OFFICE OF ALAN W. CANNON					
Address 834 South Wolfe Road					
City Sunnyvale		State California		ZIP 94086	
Country U.S.A.		Telephone (408) 736-3554		Fax (408) 736-3564	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.					
NAME OF SOLE OR FIRST INVENTOR:			<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any]) DWAYNE P.			Family Name or Surname MOREJOHN		
Inventor's Signature Dwight P. Morejohn				Date 6-7-04	
Residence: City Davis		State CA		Country US	
Citizenship US					
Mailing Address 731 North Campus Way					
City Davis		State CA		ZIP 95616	
Country US		Citizenship US			
NAME OF SECOND INVENTOR:			<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any]) CHARLES S.			Family Name or Surname TAYLOR		
Inventor's Signature				Date	
Residence: City Stockton		State NJ		Country US	
Citizenship US					
Mailing Address 66 Strimples Mill Road					
City Stockton		State NJ		ZIP 08559	
Country US		Citizenship US			
<input type="checkbox"/> Additional inventors or a legal representative are being named on the _____ supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.					



**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

☐ Declaration
Submitted
With Initial
Filing

OR

☒ Declaration
Submitted after Initial
Filing (surcharge
(37 CFR 1.16 (e))
required)

Attorney Docket Number GUID-036

First Named Inventor Morejohn, Dwight P.

COMPLETE IF KNOWN

Application Number 10/748,733

Filing Date December 30, 2003

Art Unit 3764

Examiner Name Unassigned

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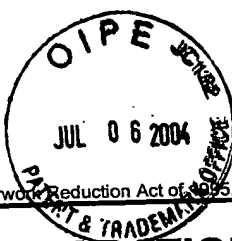
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				Yes	No
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

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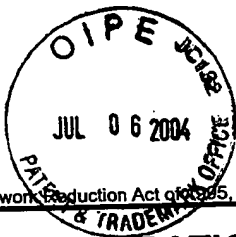
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DECLARATION — Utility or Design Patent Application

Direct all correspondence to: <input checked="" type="checkbox"/> Customer Number: 36154		OR <input type="checkbox"/> Correspondence address below	
Name LAW OFFICE OF ALAN W. CANNON			
Address 834 South Wolfe Road			
City Sunnyvale		State California	ZIP 94086
Country U.S.A.	Telephone (408) 736-3554	Fax (408) 736-3564	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) DWIGHT F.		Family Name or Surname MOREJOHN	
Inventor's Signature			Date
Residence: City Davis	State CA	Country US	Citizenship US
Mailing Address 731 North Campus Way			
City Davis	State CA	ZIP 95616	Country US
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) CHARLES S.		Family Name or Surname TAYLOR	
Inventor's Signature <i>Charles S. Taylor</i>			Date 6-19-04
Residence: City Stockton	State NJ	Country US	Citizenship US
Mailing Address 600 Stimpson Mill Road 43 LAMBERT ROAD - C87			
City Stockton	State NJ	ZIP 08559	Country US
<input type="checkbox"/> Additional inventors or a legal representative are being named on the supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.			



PTO/SB/02A (08-03)

Approved for use through 08/31/2003. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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DECLARATION**ADDITIONAL INVENTOR(S)**
Supplemental SheetPage 3 of 3

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
HARRY LEONARD		GREEN II	
Inventor's Signature <i>H. Green II</i>		Date 6-16-04	
Santa Cruz Residence: City	CA State	US Country	US Citizenship
2464 Glen Canyon Road Mailing Address			
Mailing Address			
Santa Cruz City	CA State	95060 Zip	US Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	Zip	Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	Zip	Country

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